

MAY 09 2008

NIRO, SCAVONE, HALLER & NIRO
181 WEST MADISON STREET - SUITE 4600
CHICAGO, ILLINOIS 60602-4515
TELEPHONE NO. (312) 236-0733
FACSIMILE (312) 236-3137

TO: U.S. Patent and Trademark Office Central FAX Number 571-273-8300

DATE: May 9, 2008

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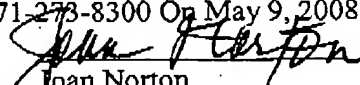
FROM: Vasilios D. Dossas
Reg. No. 30,745

APPLN: Serial No. 10/727,794
Filed: December 4, 2003
Kurt Winiecki
Atty Docket No. 3539

RE: Amendment in Response to January 9, 2008 Office Action

CERTIFICATE OF TRANSMISSION UNDER 37 C.F.R. 1.8

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Joan Norton
(312) 236-0733

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PTO/SB/17 (10-07)

Approved for use through 06/30/2010. OMB 0651-0032
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2008		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/727,794
		Filing Date	12/04/2003
		First Named Inventor	Kurt Winiecki
		Examiner Name	Merchant, Shahid R.
		Art Unit	3692
		Attorney Docket No.	3539
TOTAL AMOUNT OF PAYMENT (\$)			

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: 14-1131 Deposit Account Name: Niro, Scavone, Haller...
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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	210	105
Multiple dependent claims	370	185
Total Claims		
- 20 or HP = _____ x _____ = _____	Extra Claims	Fee (\$)
HP = highest number of total claims paid for, if greater than 20.	Fee Paid (\$)	
Indep. Claims		
- 3 or HP = _____ x _____ = _____	Extra Claims	Fee (\$)
HP = highest number of independent claims paid for, if greater than 3.	Fee Paid (\$)	

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
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4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____

Fees Paid (\$)

SUBMITTED BY		Registration No.	Telephone
Signature	<i>Vasilios Dossas</i>	(Attorney/Agent) 30,745	312-236-0733
Name (Print/Type)	Vasilios D. Dossas	Date	5/9/08

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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MAY 09 2008

PTO/SB/21 (01-08)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10727,794
	Filing Date	December 4, 2003
	First Named Inventor	Kurt Winlecki
	Art Unit	3692
	Examiner Name	Merchant, Shahid R.
Total Number of Pages in This Submission	Attorney Docket Number	3536

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Niro, Scavone, Haller & Niro		
Signature	<i>Vasilios D. Dossas</i>		
Printed name	Vasilios D. Dossas		
Date	5/9/08	Reg. No.	30,745

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:	
Signature	<i>Joanie Norton</i>
Typed or printed name	Joanie Norton
Date	5/9/08

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